PART B - FEE(S) TRANSMITTAL							
MAR 2 3	this form, together wi		ee(s), to: <u>N</u> or]	Fax	Mail Stop ISSU Commissioner for P.O. Box 1450 Alexandria, Virg (703) 746-4000	inia 22313-1450	
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EDWARD B. WELLER Gary Cary Ware & Freidenrich 1755 Embarcadero Road Palo Alto, CA 94303					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below.		
03/30/2005 HDEMESS2 00000003 10634593 01 FC:1501 1400.00 OP					Rosa A. Caviedes (Depositors na Signat		
01 FC:1501 02 FC:1504	300.00 DP 21.00 DP				March		(D
03 FC:8001 APPLICATION NO.	FILING DATE		FIRST NAME	D INVEN	NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/634,593	08/04/2003	Midori Takano		Takano		2102487-991270	6518
	PHASE INTERPOLATOR A		-				
APPLN. TYPE	SMALL ENTITY	ISSUE FI		Pl	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400)		\$300 	\$1700	04/14/2005
EXAMINER		ART UNIT		Ci	LASS-SUBCLASS	J	
WELLS, KENNETH B 281			5 327-175000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Kabushiki Kaisha Toshiba Japan							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Governm							
4a. The following fee(s) are X Issue Fee	e enclosed:	4 b	D. Payment of	` '	nount of the fee(s) is en	alarad	
				t card. Form PTO-2038 is attached.			
			The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number $07-1895$ (enclose an extra copy of this form).				
5 Change in Entity Status	(from status indicated above	.)	Deposit Acco	ount Nu	mber <u>0/-1895</u>	(enclose an extra c	copy of this form).
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature	Edul The	QQ,				arch 17, 2005	
Typed or printed name Edward B. Weller			•	Registration No. 37,468			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce P.							

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete If Known Effective on 12/08/2004. uant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/634.593 RANSMITTAL Filing Date August 4, 2003 First Named Inventor Midori Takano for FY 2005 Examiner Name Wells, Kenneth B. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2816 Attorney Docket No. 2102487-991270 TOTAL AMOUNT OF PAYMENT (\$)1,721.00 METHOD OF PAYMENT (check all that apply) Money Order None Credit Card Other (please identify): _ Check Deposit Account Name: DLA Piper Rudnick Gray Cary US LLP Deposit Account Deposit Account Number: 07-1896 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES **Small Entity Small Entity Small Entity** Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 50 130 65 200 100 100 Design Plant 200 100 300 150 160 80 250 600 300 500 Reissue 300 150 200 100 0 0 Provisional 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) 50 25 Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) 200 100 180 360 Multiple dependent claims Multiple Dependent Claims **Total Claims** Extra Claims Fees Paid (\$) Fee (\$) Fee Paid (\$) Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20 Indep. Claims **Extra Claims** Fee (\$) -3 or HP =HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

Other (e.g., late filing surcharge): <u>Issue and Publication Fees (\$1700; 7 soft copies of issued patent</u>					
SUBMITTED BY					
Signature	Edward I wille	Registration No. 37,468 (Attorney/Agent)	Telephone (650) 833-2436		

Number of each additional 50 or fraction thereof

(round up to a whole number)

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sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

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4. OTHER FEE(S)

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